MAURICE EDWARD CAMPBELL

BEN CURRY (Warden)

VS.

Plaintiff.

Defendant.

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FILED

AUG 4 2008

RICHARD W. WIEKING CLERK, U.S. DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

3725

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA

CASE NO.

PRISONER'S

APPLICATION TO PROCEED FORMA PAUPERIS

I MAURICE E. CAMPBELL, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

Are you presently employed? Yes ____ No __X 1. If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer: N/A Gross: ______ Net: _____

Employer:

PRIS. APP. TO PROC. IN FORMA PAUPERIS, Case No. ______ - 1 -

| | | r is "no," state the date of last employment; | | |
|--------|--------|---|----------------|-----------------------|
| salary | and w | ages per month which you received. (If yo | u are imprison | ed, specify the last |
| • | - | ployment prior to imprisonment.) | | |
| PAR | OMAS | UNT PICTURES MOTION PICTURE | STUDIOS/ | HOLLYWOOD |
| GRI | P D | EPARTMENT LOCAL # 80. | | |
| | | | | |
| 2. | Have | you received, within the past twelve (12) | months, any mo | oney from any of the |
| follow | ing so | ources: | | |
| | a. | Business, Profession or | Yes | No <u>X</u> |
| | | self employment | | |
| | b. | Income from stocks, bonds, | Yes | No X |
| | | or royalties? | | |
| | c. | Rent payments? | Yes | No X |
| | d. | Pensions, annuities, or | Yes | No X |
| | | life insurance payments? | | |
| | e. | Federal or State welfare payments, | Yes | No <u>x</u> |
| | | Social Security or other govern- | | |
| | | ment source? | | |
| If the | answe | er is "yes" to any of the above, describe eac | h source of mo | ney and state the amo |
| | | m each. N/A | | |
| | | N/A | - | |
| | | | | |
| | | you married? | Yes | No X |
| | | Il Name: | | |
| - | | | | |
| - | | ace of Employment: | | |
| • | | onthly Salary, Wages or Income: N/A | | |
| Gross | | Net \$ | | S |

| | b. List the persons other than your spouse who are dependent upon you for |
|--|--|
| 1 | b. List the persons other than your spouse who are dependent. support and indicate how much you contribute toward their support. (NOTE: |
| 2 | For minor children, list only their initials and ages. DO NOT INCLUDE |
| 3 | |
| 4 | THEIR NAMES.). N/A |
| 5 | |
| 7 | 5. Do you own or are you buying a home? Yes No X |
| 8 | Estimated Market Value: \$ Amount of Mortgage: \$ |
| 9 | 6. Do you own an automobile? Yes No X |
| 10 | Make Year Model |
| 11 | Is it financed? Yes No If so, Total due: \$ |
| 12 | Monthly Payment: \$ |
| 13 | 7. Do you have a bank account? Yes No _X (Do not include account numbers.) |
| 14 | Name(s) and address(es) of bank: |
| 15 | |
| 16 | Present balance(s): \$ |
| 17 | Do you own any cash? Yes No _X Amount: \$ |
| | Do you own any cash? Tes No |
| 18 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated |
| 18 19 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated |
| 19 | Do you own any cash? Tes No Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No |
| 19 20 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 19 20 21 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 19 20 21 22 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 19 20 21 22 23 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 19 20 21 22 23 24 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 20 21 22 23 24 25 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |
| 19 20 21 22 23 24 25 26 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X_ 8. What are your monthly expenses? N/A Rent: \$ Utilities: Food: \$ Clothing: Charge Accounts: N/A Name of Account |
| 19 20 21 22 23 24 25 | Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes No _X |

| | you have any other debts? (List current obligations, indicating amounts and to whom they are |
|------------------|--|
| 2 | payable 120 not include account numbers.) |
| 3 | N/A |
| | |
| 4 5 | 10. Does the complaint which you are seeking to file raise claims that have been presented |
| 6 | in other lawsuits? Yes No X |
| 7 | Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in |
| 8 | which they were filed. N/A |
| 9 | |
| 10 11 | I consent to prison officials withdrawing from my trust account and paying to the court |
| 12 | the initial partial filing fee and all installment payments required by the court. |
| 13 | I declare under the penalty of perjury that the foregoing is true and correct and |
| | understand that a false statement herein may result in the dismissal of my claims. |
| 14 | understand that a large statement and |
| 15 16 | July 20, 2008 me Glil |
| 17 | DATE SIGNATURE OF APPLICANT, MAITITURE FINARD CAMPBELL # E-10493 |
| 18 | MAURICE EDWARD CAMPBELL " E-10493 |
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| PRIS. APP. TO PR | CC. IN FORMA PAUPERIS, Case No 4 - |

CERTIFICATE OF FUNDS IN PRISONER'S ACCOUNT

| I certify that attached is a true and correct copy of the |
|---|
| prisoner's trust account statement showing transactions of |
| Campbell, Maurice E, for the last six months (prisoner name) |
| at CORRECTIONAL TRAINING FACILITY-SOLEDAD where (name of institution) |
| (s)he is confined. |
| I further certify that the average deposits each month to this |
| prisoner's account for the most recent 6-month period were |
| \$ and the average balance in the prisoner's account |
| each month for the most recent 6-month period was\$ |
| |
| |
| Dated: 7-30-08 Ulanda Chave Acct. Spec Authorized officer of the institution |

Correctional Training Facility P. O. Box 686 (8 Mules N of Soledad on US 101) Soledad. California 93960 ATTN: Trust office



THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE. / 30/08

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY DEMAN CHANG HECT!

| 1 | |
|----|---|
| 2 | Case Number: |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | CERTIFICATE OF FUNDS |
| 10 | IN |
| 11 | PRISONER'S ACCOUNT |
| 12 | |
| 13 | I certify that attached hereto is a true and correct copy of the prisoner's trust account |
| 14 | statement showing transactions of Maurice E. Campbell for the last six months |
| 15 | at CORRECTIONAL TRAINING FACILITY/SOLEDAD STATE PRISON |
| 16 | [prisoner name] |
| 17 | Monterey County California where (x)he is confined. |
| 18 | [name of institution] |
| 19 | I further certify that the average deposits each month to this prisoner's account for the |
| 20 | most recent 6-month period were \$ and the average balance in the prisoner's |
| 21 | account each month for the most recent 6-month period was \$ |
| 22 | |
| 23 | Dated: |
| 24 | [Authorized officer of the institution] |
| 25 | |
| 26 | |
| 27 | |
| 28 | |
| | |

62.63-

AVAILABLE BALANCE CURRENT

REPORT DATE: 07/30/08 PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS CTF SOLEDAD/TRUST ACCOUNTING INMATE TRUST ACCOUNTING SYSTEM INMATE TRUST ACCOUNT STATEMENT

.701

REPORT ID: TS3030

FOR THE PERIOD: FEB. 29, 2008 THRU JUL. 30, 2008

ACCOUNT NUMBER: E10493 ACCOUNT NAME: CAMPBELL, MAURICE EDWARD PRIVILEGE GROUP: A

BED/CELL NUMBER: CFCWT200000243L ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

| | HOLD AMOUNT | 0.80 | 4.00 0.50 | 3.80 | 00.H | 1.50 | 34.13 | 1.10 |
|-------------------------|----------------|--------------------------|-------------------|--------------------------|---|-------------------------------------|-------------------|--------------------------|
| CURRENT HOLDS IN EFFECT | COMMENT | 0025 LCOPY 0025 LCOPY | | | | | | |
| | DESCRIPTION | LEGAL COPIES HOLD | LEGAL COPIES HOLD | LEGAL COFIES HOLD | LEGAL COPIES HOLD LEGAL POSTAGE HOLD | LEGAL COPIES HOLD LEGAL COPIES HOLD | LEGAL COPIES HOLD | LEGAL COFIES HOLD |
| | HOLD | H118 | H118 | H118 | H118 H109 | H118 H118 | H118 | H118 H118 |
| | DATE PLACED | 07/02/2008 | 07/02/2008 | 07/16/2008 07/16/2008 | 07/17/2008 | 07/22/2008 | 07/24/2008 | 07/24/2008 07/24/2008 |

TRANSACTIONS TO BE POSTED BALANCE HOLDS 0.00 CURRENT BALANCE TRUST ACCOUNT SUMMARY 00.0 WITHDRAWALS TOTAL DEPOSITS TOTAL 00.0 BEGINNING BALANCE

0.00

30/08/

cerectional Training Facility . O. Box 636

& Miles N of Soledad on US 101) 93960 soledad, California

ATIN: Trust office

THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED CALIFOFNIA DEPARTMENT OF CORRECTIONS

July 20th, 2008

| | | 6 0TT 2 C 0 | |
|--------|---|---|--------------|
| Case#(| if applicable): Maurice Edward Campbell v. F | Sen Curry | , 200 |
| То: | CLERK OF THE COURT [] SUPERIOR COURT [] COURT OF APPEAL [] CALIFORNIA SUPREMEM COURT | [X] FEDERAL DIST [] FEDERAL COU [] U.S. SUPREME | RT OF APPEAL |
| FROM | Maurice E, Campbell California State Prison CTF-Soledad Housing: Central C-243 P.O. Box 689 Soledad, California 93960-0689 | CDC#: E-1 0493 | |
| Re: | [X] PETITION FOR WRIT OF HABEAS CORPUS [] PETITION FOR REHEARING/RECONSIDERATION [] PETITION FOR REVIEW [] BRIEF ON APPEAL [] MOTION TO COURT | | |
| Case: | []IN RE_ []PEOPLE V []OTHER: Maurice Edward Campbell v. E | Ben Curry | |

Dear Clerk:

I am presently incarcerated at the California State Prison – Correctional Training Facility (CTF), in Soledad. Due to my incarceration, indigence or minimal funds, and the current policy of the California Department of Corrections as stated in Director Memorandum 15/04, I cannot provide the required number of copies as required by the Rules of Court.

Therefore, I must respectfully request that the court make the required additional copies and to serve any required copies on other parties as necessary.

Further, please send a conformed copy of the documents back to me as a receipt of filing. I apologize for any inconvenience that this may have caused.

Respectfully submitted,

MEGLI